

## South Dakota Board of Nursing

South Dakota Department of Health 722 Main Street, Suite 3; Spearfish, SD 57783 (605) 642-1388; Fax: (605)642-1389; www.state.sd.us/doh/nursing

## Nurse Aide Application for Re-Approval of Training Program

All Nurse Aide (NA) Training Programs in South Dakota must be approved by the South Dakota Board of Nursing pursuant to ARSD 44:04:18:15. Approval status is granted for a two-year period. Written approval or denial of approval will be issued within 90 days after receipt of the application. Send completed application and supporting documentation to:

South Dakota Board of Nursing

722 M Spear	lain Street fish, SD 5	r, Suite 3 7783			
100 00	Care	Center			
E-mail Address of Faculty:	Fax	Number: 5	37-43 85		
Select option(s) for Re-Approval:  Request re-approval without changes to pro curriculum  List personnel and licensure information Complete evaluation of the curriculum Request re-approval with faculty changes an List personnel and licensure information, Complete evaluation of the curriculum Submit documentation to support reques  List Personnel and Licensure Information Program Coordinator must be a registered provision of long-term care services. The Director	d/or curri attach cu ted curricu ation:	culum changes rriculum vitas, resi ulum changes	umes, or work his	tory for new personnel	
provision of long-term care services. The Director but may not perform training while serving as DO	or of Nursi N. (ARSD	ing (DON) may se 44:04:18:10)	rve simultaneously	east one of which is in the y as the program coordinator	
Name of Program Coordinator	RN LICENSE				
Jeanne Manyon	State	Number	Expiration Date	Verification (Completed by SDBON)	
If requesting new Preprint Coordinate		R029761	1/22/13	Stone	
If requesting new Program Coordinator, at Primary Instructor must be a licensed nurse (R provision of long-term care services. The primary	N or I DNI	with a			

Name of Primary Instructor	RN OR LPN LICENSE				
	State	Number	Expiration Date	Verification	
Climberty Bryce	SD	1021872	012014	(Completed by SDBON)	

If requesting new Primary Instructor, attach curriculum vita, resume, or work history, and attach documentation supporting previous experience in teaching adults within the past five years or documentation of completing a course in the instruction of adults.

Supplemental Personnel may assist with instruction, they must have one year of experience in their respective field of practice, i.e. additional licensed nurses, social worker, physical therapist. (ARSD 44:04:18:12) If requesting new Supplemental Personnel, attach curriculum vita, resume, or work history.



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Submit Documentation to Support Requested Curriculum Changes:						
Name of Course (if applicable): We CARE Online						
A variety of teaching methods may be utilized in achieving the classroom instruction such as independent study, video instruction, and online instruction.  Submit reference list of teaching materials utilized (include name of book or resource, publisher, publication date, etc).						
Submit documentation that supports requirements listed in ARSD 44:04:18:15, including:  Behaviorally stated objectives with measurable performance criteria for each unit of curriculum  Curriculum, objectives and agenda documenting the requirements for the minimum 75 hour course as follows:  A minimum of 16 hours of instruction prior to student having direct patient contact; the 16 hours must include: Communication and interpersonal skills, infection control, safety/emergency procedures, promoting residents' independence, respecting residents' rights.  A minimum of 16 hours of supervised practical instruction with enough instructors to ensure safe and effective care; the instructor ratio may not exceed eight students for one instructor.  Instruction in each of the following content areas (see ARSD 44:04:18:15 for more detail):  Basic nursing skills (including documentation) including: vital signs; height and weight; client environment needs; recognizing abnormal changes in body functioning and the importance of reporting such changes to a supervisor, and caring for dying clients;  Personal care skills, including: grooming, including mouth care; dressing; toileting; assisting with eating and hydration; feeding techniques; skin care; and transfers, positioning, and turning;  Mental health and social services, including: responding appropriately to behaviors; awareness of developmental tasks associated with aging process; respecting personal choices and preserving client dignity, and recognizing sources of emotional support;  Care of cognitively impaired clients, including: communication and techniques for addressing unique needs and behaviors;  Basic restorative nursing services, including: communication and techniques for addressing ambulation, eating, and dressing; range of motion; turning and positioning in bed and chair; bowel and bladder care and use of prosthetic and orthotic devices;  Residents' rights, including: privacy and confidentiality; self-determination; reporting grievances and disputes; participat						
This section to be completed by the South Dakota Board of Nursing						
Date Application Received: 11 S 12 Date Application Denied:						
Expiration Date of Approval: NOVEMBER 2013						
Board Representative:						
Date Notice Sent to Institution: [\/(,) )						

October 20, 2011